

Division of Health Care Facilities

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: TN3309	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 - MAIN BUILDING 01 B. WING _____	(X3) DATE SURVEY COMPLETED 05/19/2014
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NAME OF PROVIDER OR SUPPLIER

STREET ADDRESS, CITY, STATE, ZIP CODE

LIFE CARE CENTER OF RED BANK

1020 RUNYAN DR
CHATTANOOGA, TN 37405

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
N 831	<p>1200-8-6-.08 (1) Building Standards</p> <p>(1) A nursing home shall construct, arrange, and maintain the condition of the physical plant and the overall nursing home environment in such a manner that the safety and well-being of the residents are assured.</p> <p>This Rule is not met as evidenced by: Based on observation and interview with the Assistant Maintenance Director, it was determined that the facility failed to maintain the physical plant to ensure the safety and well-being of the residents.</p> <p>The finding includes:</p> <p>Observation and interview on May 20, 2014 at 1:34 p.m., revealed that a whirlpool tub was removed in the East Shower Room which exposed sharp ceramic tile edges and a wood board was used to close the wall where the plumbing fixtures had previously been located.</p> <p>This finding was verified by the Assistant Maintenance Director and acknowledged by the Facility Administrator during the exit conference on May 20, 2014.</p> <p>1200-08-06-.08 (1) A nursing home shall construct, arrange, and maintain the condition of the physical plant and the overall nursing home environment in such a manner that the safety and well-being of the residents are assured.</p>	N 831	<p>N 831</p> <p>The area where the whirlpool tub was located was repaired by the maintenance staff on June 13, 2014.</p> <p>A through inspection of the center was conducted by the maintenance staff to ensure the overall environment was being well maintained.</p> <p>An educational in-service was given To the maintenance director on 6/4/14 Regarding conducting overall Maintenance of the center. The maintenance director and/or designee will conduct monthly center inspections to ensure the overall environment is safe well maintained. The results of the inspections will be reviewed with the administrator monthly.</p> <p>The administrator will submit the inspection report results to the Quality Assurance Committee, consisting of the medical director, the director of nursing, and at least three other staff members for three months at which point the Quality Assurance Committee will determine the necessity for further monthly review. The administrator will monitor to assure continued compliance.</p>	
N 832	<p>1200-8-6-.08 (2) Building Standards</p>	N 832		

Division of Health Care Facilities

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X8) DATE

STATE FORM

6899

FL2P21

If continuation sheet 1 of 5

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N 832	Continued From page 1 (2) After the applicant has submitted an application and licensure fees, the applicant must submit the building construction plans to the department. All new facilities shall conform to the 2006 edition of the International Building Code, except for Chapter 11 pertaining to accessibility and except for Chapter 27 pertaining to electrical requirements; the 2006 edition of the International Mechanical Code; the 2006 edition of the International Plumbing Code; the 2006 edition of the International Fuel and Gas Code; the 2006 edition of the National Fire Protection Code (NFPA) NFPA 1 including Annex A which incorporates the 2006 edition of the Life Safety Code; the 2010 Guidelines for Design and Construction of Health Care Facilities; the 2005 edition of the National Electrical Code; and the 2005 edition of the U.S. Public Health Service Food Code as adopted by the Board for Licensing Health Care Facilities. The requirements of the 2004 Americans with Disabilities Act (A.D.A.), and the 1999 edition of North Carolina Handicap Accessibility Codes with 2004 amendments apply to all new facilities and to all existing facilities that are enlarged or substantially altered or repaired after July 1, 2006. When referring to height, area or construction type, the International Building Code shall prevail. Where there are conflicts between requirements in local codes, the above listed codes and regulations and provisions of this chapter, the most stringent requirements shall apply. This Rule is not met as evidenced by: Based on observation and interview, it was determined the facility failed to submit building	N 832	N 832 The door to the dietary was replaced by the maintenance staff on June 9, 2014. Room 101 was converted back to a non treatment room until plans can be submitted. No other areas were found to be non-complaint. The maintenance director will review code requirements prior to making any changes in the building and will submit any requests to the administrator for any needed action. The administrator will submit the change requests to the Quality Assurance Committee, consisting of the medical director, the director of nursing, and at least three other staff members for three months at which point the Quality Assurance Committee will determine the necessity for further monthly review. The administrator will monitor to assure continued compliance.	6/25/14

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N 832	Continued From page 2 construction plans to the department for a renovation and alteration to the building. The findings include: 1. Observation, and interview with the facility assistant maintenance director on May 20, 2014 at 12:39 p.m., revealed that a door leading to the kitchen, from the dining room, had been enclosed to allow for an extension of a counter top in the dining room. During the interview, it was determined that no plans had been submitted to the department. 2. Observation and interview with the Physical Therapy staff on May 20, 2014 at 12:54 p.m. revealed that room 101 was now being used for both in-patient and outpatient physical therapy. Interview with the Facility Administrator revealed that no plans had been submitted to show compliance with room air pressure requirements for a treatment area. These findings were verified by the Assistant Maintenance Director and acknowledged by the Facility Administrator during the exit conference on May 20, 2014. 1200-08-06-.08 (2) After the applicant has submitted an application and licensure fees, the applicant must submit the building construction plans to the department.	N 832		
N1111	1200-8-6-.11(4)(h) Records and Reports (4) The nursing home shall retain legible copies of the following records and reports for thirty-six months following their issuance. They shall be maintained in a single file and shall be made	N1111		

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N1111	<p>Continued From page 3</p> <p>available for inspection during normal business hours to any person who requests to view them;</p> <p>(h) Maintenance records of all safety and patient care equipment.</p> <p>1. Routine maintenance shall be administered according to the manufacture's recommended maintenance for the above equipment.</p> <p>2. Ensure that facility staff or contract personnel are appropriately trained to conduct safety and patient care equipment inspections.</p> <p>This Rule is not met as evidenced by: Based on record review and interview, the facility failed to maintain inspection, testing, and maintenance reports for building safety equipment in a manner allow review during business hours.</p> <p>The finding includes:</p> <p>Record review and interview with the Facility Administrator, on May 20, 2014 at 10:44 a.m. revealed no sprinkler system records available for review for the period of third and fourth quarter of 2013.</p> <p>This finding was verified and acknowledged by the facility administrator during the exit conference on May 20, 2014.</p> <p>(4) The nursing home shall retain legible copies of the following records and reports for thirty-six</p>	N1111	<p>N1111</p> <p>The inspection reports were emailed to the surveyor on 5/20/14.</p> <p>All other inspection reports were available for viewing.</p> <p>The maintenance director will provide the administrator with the inspection records notebook prior to going on vacation.</p> <p>The administrator will review the inspection reports to the Quality Assurance Committee, consisting of the medical director, the director of nursing, and at least three other staff members for three months at which point the Quality Assurance Committee will determine the necessity for further monthly review. The administrator will monitor to assure continued compliance.</p>	6/25/14

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N1111	Continued From page 4 months following their issuance. They shall be maintained in a single file and shall be made available for inspection during normal business hours to any person who requests to view them: (h) Maintenance records of all safety and patient care equipment. 1. Routine maintenance shall be administered according to the manufacture's recommended maintenance for the above equipment.	N1111		